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ABSTRACT

This paper discusses the efforts to professionalize teaching in light of four questions: (1) Can an occupational group, through its own efforts, obtain increased professional status? (2) What might those efforts look like? (3) What conditions must be obtained in order that those efforts might best succeed? and (4) Do such strategies serve good purposes, or might they? The secondary purpose is to develop a framework to guide needed research designed to support or reject the assumptions and hypotheses set forth in this paper. Accordingly, after brief introductory notes on the future of teaching, the first section identifies three distinct approaches in the literature on teacher status and professionalization: the "attributes" or "traits" approach, the "functionalist" approach, and the "process" approach. The main body of the paper elaborates an extended comparison with the changing status of medicine during the last two centuries, identifying several factors leading to the transformation of the medical profession and mapping these onto the teaching profession: new technology, training linked with the new technology, public support for restricted practice, public valuing of schooling, fragmented demand for services, and bifurcation of authority. The ensuing discussion concludes that teaching cannot achieve the prestige of medicine, since it fails to meet any of these six criteria. Therefore, instead of using the medical analogy, it is argued that teachers should base their claim to professionalism on the moral obligations of compulsory schooling. A 102-item bibliography is included. (TE)

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Center for Educational Renewal

PROFESSIONALIZING THE PROFESSION

Notes on the Future of Teaching

ROGER SODER

Occasional Paper No. 4
June 1986

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PREFACE

This paper is the first of a series of technical reports prepared by the Center for Educational Renewal. Directed by Dr. John I. Goodlad, the Center is a program unit of the Institute for the Study of Educational Policy, College of Education, University of Washington.

The Center is currently involved in a multi-phase study of the education of educators, with the first phase taking place over a five-year period. During this initial phase, attention will focus on three interrelated elements:

1. a comprehensive examination of representative schools, colleges, and departments of education, in order to determine current conditions and circumstances relating to the education of educators;

2. a consideration of selected professions and their preparation programs, in order to develop insights contributing to the conceptualization of new models of educator preparation; and

3. the establishment of a national network of some twelve school-university partnerships throughout the country, each with an agenda of simultaneous improvement of both educator preparation programs and the conduct of K-12 schooling.

Support for the initial phase of the Center's program is provided by the Exxon Education Foundation, the Danforth Foundation, and the Mertz-Gilmore Foundation.

As part of the second element of the Center's program, Professionalizing the Profession deals with the process of professionalizing an occupation. The report is exploratory, rather than summative; the intent is to clarify the rhetoric surrounding notions of "profession," and to provide, to the extent possible, dispassionate grounds for further research. Subsequent reports will focus more particularly on the commonalities of professional training programs and on the application of findings to the development of models for reconstruction of educator preparation programs.

The opinions expressed herein are the responsibility of the author and do not necessarily reflect the position or policy of the funding agencies; no official endorsement of funding agencies should be inferred.

PROFESSIONALIZING THE PROFESSION

Notes on the Future of Teaching

Teachers, individually and through their organizations, have long been preoccupied with their status as an occupational group, and preoccupied particularly with legitimizing their claims that teaching is a profession.

The historical literature is replete with reflections of this preoccupation. Early twentieth century adjurations to teachers (and to those involved in the training of teachers) reveal two recurring themes: (1) a sense of already being a bit off the mark in the status drive and (2) a desire to consider teachers as at least potential candidates for membership into the inner circles of the "real" professions.

One notes, for example, these themes in comments of John Dewey in 1904:

> I doubt whether we, as educators, keep in mind with sufficient constancy the fact that the problem of training teachers is one species of a more generic affair -- that of training for professions. Our problem is akin to that of training architects, engineers, doctors, lawyers, etc. Moreover, since (shameful and incredible as it seems) the vocation of teaching is practically the last to recognize the need of specific professional preparation, there is all the more reason for teachers to try to find what they may learn from the more extensive and matured experience of other callings.[1]

Some fifty years later, the themes emerge in refined form, of which one example will suffice:

> The needed improvements in education cannot be achieved unless we cloak teachers with professional freedom and responsibility. This professional responsibility must be accompanied by professional competence. When the American public recognizes that the teacher

> with a group of children has essentially the same kind of professional responsibility that the surgeon has in the operating room, there will be a public demand for professional salaries and professional preparation. Then we shall not need to concern ourselves so much about the status of the teacher.[2]

And, in our own time, an examination of the current rhetoric suggests that the "why we are professionals" and "how do we get others to treat us as professionals" themes are of continuing concern. Two salient developments reflect this concern.

In May 1985, the Carnegie Forum on Education and the Economy announced the appointment of a panel to develop plans to make teaching a "true profession.[3] Later in the same year, the heads of the National Education Association and the American Federation of Teachers announced major plans to "professionalize" the occupation.[4]

The strategies for "professionalizing" teaching range from the substantive to the symbolic. One substantive strategy proposed is a standardized exam. Albert Shanker of the AFT called for a national teacher examination "similar to those required by the medical and legal professions,"[5] and in July 1985, the NEA lent its tentative support for an examination of some kind.

Another strategy, proposed by Mary Hatwood Futrell, reflects more of a symbolic approach. As reported in Education Week, Ms. Futrell "encouraged all certified teachers to frame and post their credentials in their classrooms, 'like doctors, lawyers, and other professionals.' This, she said, will 'let the public know who is qualified to teach.'"[6]

Four questions are raised by these announced strategies to professionalize what is already claimed to be a profession: (1) Can an occupational group, through purposive efforts, obtain increased professional status? (2) What might those efforts look like? (3) What conditions must obtain in order that those efforts might best succeed? and (4) Do such strategies serve good purposes, or might they?

The purpose of this paper is to discuss the efforts to professionalize the teaching profession in light of these questions. The paper has a second purpose as well. It should be noted that to a considerable extent data are lacking as to current perceptions of teachers and others regarding issues of professionalization. Therefore, the secondary purpose is to develop a framework to guide needed research designed to support or reject the assumptions and hypotheses set forth in this paper.

Teacher Status and Professionalization

It is clear that teachers have long considered themselves members of a profession, with their self-proclamations of membership in this particular class of occupations indicated early on. The primary purpose of the National Teachers' Association --later to become the National Education Association -- was, according to its venerable preamble, "to elevate the character and advance the interests of the profession."[7] William Russell's paper presented at the founding meeting of the NTA in 1857 noted that teachers needed a professional organization "to reap whatever benefits our

medical brethren derive from their national association" and to provide the teaching profession with the "proper distinction between a profession and any ordinary vocation."[8] The preoccupation with elevating teaching from vocation to profession has continued, uninterrupted, to our own time.

Although it is clear that teachers consistently have claimed membership in the class of "profession" (as opposed to the apparently less exalted class of "trade," "vocation," or "occupation"), it is less clear as to the nature of what it is they claimed to be. But lack of clarity in professionalization rhetoric is not limited to one occupational group; just precisely what constitutes the class of "profession" has been the subject of considerable speculation and disagreement, at least for the greater part of this century.

In viewing the literature on professionalization, three distinct approaches to the issue can be discerned: (1) the "attributes" or "traits" approach, (3) the "functionalist" approach, and (3) the "process" approach.[9]

The attributes approach has tended to focus on developing a definition of the term profession, then determining which of the several professions appear to meet the defining criteria. The functionalist approach also focuses on definitional criteria, with the added major argument that professions qua professions are what they are because they function positively to maintain societal equilibrium. The process approach tends to take a less benign and more critical view of the matter, with a focus on power relationships between social classes.

The literature is vast, and there is little agreement as to the nature of the class of professions or its functions.[10] It is not our purpose to either attempt to arbitrate the matter or to develop yet another definition. What is of concern here is that teachers consider their occupation to be a profession, and, as we shall argue, they consider it so in the sense that they consider medicine and law professions.

What also is of concern here is that others in society have looked askance at the teachers' claims. The relatively low status of teachers in America from colonial times to the present has been well-documented.[11] Accordingly, rather than essay the entire literature, selected illustrations are presented.

Although it is comforting to think of Mark Hopkins, the log, and the student, the dominant personification of the teacher in early America is, rather, that of Ichabod Crane:

> This "odd mixture of small shrewdness and simple credulity" was no hero to the men, and when Brom Bones in his ghastly masquerade frightened Ichabod out of town and smashed a pumpkin on his credulous head, he was passing the symbolic judgment of the American male community on the old-time schoolmaster.[12]

Robert Wiebe also alludes to the image of Ichabod Crane:

> If the greatest public need for professionalism was in medicine, the greatest occupational need was in teaching. Ridiculed over the nineteenth century as Ichabod Cranes and fussy schoolmarms, teachers embodied the apparent paradox of exceptionally low prestige in a land that acclaimed universal education. Actually, there was no paradox. To most Americans of the nineteenth century, universal education referred only to the bare rudiments, a basic version of the three R's, which countless people were qualified to teach. Few could live on the teacher's starvation salary, few saw opportunities for advancement, and therefore very

> few--often the Ichabod Cranes and the futile old maids--devoted a life to it. Far more often teaching was a way-station, for a James A. Garfield and a Henry M. Teller in search of careers and for young ladies in search of husbands.[13]

Many teachers were indentured servants. As Jonathan Boucher, writing in Maryland in 1773, noted,

> Not a ship arrives either with redemptioners or convicts, in which school masters are not as regularly advertised for sale, as weavers, tailors, or any other trade; with little other difference, that I can hear of, excepting perhaps that the former do not usually fetch so good a price as the latter.[14]

Consider, too, R. Carlyle Buley's unflattering assessment:

> Many teachers were ignorant, others merely queer. Good teachers were hard to get, nor were the low pay and lack of training facilities entirely accountable; it would seem that teaching has always attracted (or else protected and retained) more than its share of the constitutionally inept and impractical.[15]

Main, too, presents a telling description of the status of teachers in revolutionary America:

> Social classes existed in early America, but their precise definition is as unclear as the prestige order was flexible. Everyone pretended to exalt the farmers, giving to professional men and still more to merchasnts an inferior status, and to artisans no status at all. In practice, however, Americans looked for leadership to their professional men as well as to the well-to-do landowners, while in the North merchants were granted high rank. The truth is that the social climber did not have to change his occupation, except of course that he could not simply remain a laborer--<u>or a teacher</u>.[16] [Emphasis added]

One can argue that doctors and lawyers, too, were subjected to criticism and often held in low esteem in early America.[17] The point is that

doctors and lawyers, beginning in the early 20th Century, managed to overcome these earlier negative stereotypes, while teachers did not.

Most teachers, too, are no doubt aware of the long-standing views of their occupation held by others. The sentiments underlying the old saw, "those who can, do; those who can't, teach; those who can't teach, teach teachers," are commonly reflected in the literature.

In an early sociology of education classic, Willard Waller notes that:

> Concerning the low social standing of teachers much has been written. The teacher in our culture has always been among the persons of little importance, and his place has not changed for the better in the last few decades.[18]

The low status of teachers, according to Waller, is due, among other things, to the belief that

> Teaching is quite generally regarded as a failure belt. There is some justice in this belief. A popular epigram of a few years ago had it that teaching was the refuge of unsaleable men and unmarriageable women. The epigram is unjust to many individuals, as any generalization so sweeping, but it mirrors accurately a general belief.[19]

Other sociologists have noted similarly the low status of teachers. The Lynds, writing three years before Waller, observed that "few things about education in Middletown are more noteworthy than the fact that the entire community treats its teachers casually." Teachers, according to the Lynds, "are for the most part nonentities," with Middletown paying them "about what it pays a retail clerk." The underlying reason for the low status of teachers was cultural:

> The often bitter comments of the teachers themselves upon their lack of status and recognition in the ordinary give and take of local life are not needed to make an observer realize that in this commercial culture the "teacher" and "professor" do not occupy the position they did even a generation ago.[20]

Such sociological analyses have been echoed in more recent times with little change. Teachers (along with librarians, social workers, and nurses) have the dubious distinction of being considered as belonging to a "semi-profession" or an "emerging" profession,[21] with all of the implications of second-class status implied by such labeling. In a widely quoted analysis, Glazer asserts that the "major professions are medicine and law; the minor professions [including education] are all the rest."[22] Another analyst considers teachers as the "economic proletarians of the professions."[23]

It is not only by sociologists' pronouncements that ye shall know them. The occupational status of teachers is reflected, too, in the popular culture: in addition to the credulous Ichabod, teachers (and the rest of us) know of Tom Sawyer's schoolmaster, Our Miss Brooks, Miss Grundy, and Mr. Flutesnoot.

Teachers, too, know that a central and recurring theme of the criticisms of the education of teachers is the relatively low academic ability of those who would enter the field.[24] It is difficult to avoid a sense of lowly status when one is told repeatedly that most of the people entering your chosen field of endeavor are academically deficient when compared with those intent on other lines of work; and that the few bright teachers, such as they are, tend to bail out of teaching at the first opportunity.

The general sentiment has long appeared to be that not only are the worst and the dumbest stumbling into teaching, but that, with few exceptions, the lesser lights are staying on. As one observer put it, "We can expect only the dumb and the dull to linger in teaching careers . . . our teaching corps is unacceptably incompetent."[25]

Teachers know, too, of the generally unflattering assessments of the quality of their training programs. The indictments are common and have a common theme, as reflected in this comment from a historian writing some twenty years ago:

> . . . nor was quality guaranteed when educationists began turning out hordes of teachers crammed with methodology and jargon to match, but commonly not matched by a command of the subject they were preparing to teach.[26]

More recently, John Goodlad tells us that "Teacher education programs are disturbingly alike and almost uniformly inadequate." Unless major gambles are undertaken to achieve radical breakthroughs, "future attempts to improve teacher education--and subsequently, our schools--are doomed to repeat the puny, inadequate efforts of the past."[27]

Training programs are suspect, which reflects poorly on those who are trained in those programs. The trainers, too, have been portrayed is less than glowing terms:

> Study, reflection, debate, careful reading, even, yes, serious thinking is often conspicuous by its absence. What is passed off as 'research' is either really training program evaluation or trivial nosecounting. . . . The unreflective, unquestioning (if frighteningly well-meaning) professor is still, alas, the rule. May his tribe decrease.[28]

Given the welter of opinion from all sides, teachers are well aware of their relatively low standing in the status market. They tend to accept the low estimates of others (although, as we shall argue, they think those estimates are undeserved). Unlike those in other professions, they tend to indulge in harsh self-criticism:

> The tempered restraint that characterizes the criticisms of medicine by doctors and of law by lawyers is unknown in the teaching profession. Perhaps it is that educators, having been convinced of their lowly status by centuries of condescension, neglect, and contempt, are likewise unrestrained when they view their own profession.[29]

Accordingly, while teachers through their organizations proclaim theirs to be a profession in every way like the "other" professions, the rhetoric has a certain hollowness. The rhetoric also appears, at times, to take on a peculiarly oxymoronic quality. For example, one writer cites with approval this strategy proposed by the NEA/NCTEPS in 1952:

> The profession of teaching should be made a socially acceptable one, its members functioning as effective members of the community.[30]

While teachers like to listen to the rhetoric, they listen with some uneasiness and some ambivalence.

Teachers sense (or think they sense) the possibly amused reaction of the "real" professionals, the academicians, and the sociologists to their claims; they wonder, perhaps, if they are not overwrought. The reaction of these other observers to the claims, teachers might well imagine, is rather like the indulgent response of airplane passengers to the youngster who announces he is a "pilot" because he's wearing a pilot pin.

Such reactions are not always made explicit. A doctor or a lawyer might not display such a reaction or publicly voice such disdain of the teachers' claims to professionalism or of teachers' claims to be one with the medical and legal professions. But teachers can get a sense of such reactions from some professional groups, if only by default. (Teachers know that while they advert to the "real" professions, the adversion is not symmetrical. There are no instances in the literature, for example, in which those involved in medicine have claimed that their professional standing could be improved by emulating teachers.)

Academicians, on the other hand, tend to be less reticent in their responses to the claims of teachers. If, for example, a treasured--if possibly dubious--attribute of a "real" profession is a base of theoretical knowledge, transmitted in an academic setting, consider how teachers might react to the sardonic comments of Jencks and Riesman:

> In teaching, on the other hand, it would be hard to demonstrate that even today there is any body of knowledge about pedagogy that can be transmitted from old-timers to apprentices. Yet enormous efforts have been made to professionalize teaching and to ensure that all recruits will go through the same motions of acquiring whatever expertise there is.[31]

It was one thing for a professor of education to say, in 1906, that

> The more I see of teachers and teaching, the less confidence I have in anyone's power to say with precision or in great detail what abilities and qualities are essential to success in the classroom.[32]

But teachers in the last few decades would prefer to believe that their profession had at long last begun to arm itself with some sort of knowledge

base. To read that all that had happened was, in effect, an effort to be dismissed with a patronizing "go through the motions of acquiring whatever expertise there is" phrase is a bit disconcerting.

Consider, too, the comments of Jencks and Riesman regarding the status of normal schools that have become colleges and universities:

> Then the legislature typically responded by reorganizing all the teacher training institutions, including some that were not really "ready." Or at least the legislature conducted such reorganizations on paper. In practice the change often takes a full generation to accomplish. Thus many of the places now called state colleges or universities still have more Ed.D.s than Ph.D.s on the faculty, more girls than boys in the student body, and more docility and low-level vocationalism everywhere than one would find in better-established institutions.[33]

It is not necessary to be a Yale critic to argue that the slights contained in this paragraph are many and painful; even a superficial exegesis reveals a high level of disdain for teacher education (as well as disdain for those with Ed.Ds and women).

Both the theoretical basis of teaching, and the appropriateness of training teachers in a university setting have been questioned by at least two certified academic Olympians. Abraham Flexner, writing in 1930, argued that

> Of the professional faculties, a clear case can, I think, be made out for law and medicine; not for denominational religion, which involves a bias, hardly perhaps for education, certainly not at all for business, journalism, domestic "science," or library "science. . . .[34]

Six years later, Robert M. Hutchins propounded the notion that teacher

training belonged in a technical institute apart from the university.[35] (Hutchins also suggested that training programs for medicine, law, and other "professions" be housed elsewhere in "institutes." Again, however, it should be noted that medicine and law managed to gain considerably in status--as did their training programs--while teaching did not.)

The preoccupation with occupational prestige is, as has been suggested, hardly the peculiar province of teachers. But what gives the preoccupation particular importance to us--and a certain poignancy--is the high level of status discrepancy in the teaching occupation. Status discrepancy, as considered here, is a measure of the relationship between perceived self-value (and the implications of that self-value) and perceived valuing by others. Considered as such, status discrepancy is not related to overall status per se. For example, doctors think their work is important and they should thus be accorded high status; in terms of perceived value by others, doctors are indeed accorded high status. Shiners of shoes don't think their work is important and do not think they should be accorded high status (and they are not).[36] Both doctors and shoe shiners are illustrative of occupational groups with low status discrepancy.

Teachers, on the other hand, most likely provide an example of high status discrepancy. Given the historical themes of the teacher professionalization rhetoric, it is reasonable to suggest that teachers believe their work is important, but they also believe that they are not accorded the high status they deserve.

As a hypothsis to test in further research, we suggest that much of the rancor that apparently permeates the occupation of teaching stems from the high level of status discrepancy between perceived self-value and valuing by others. That rancor, often reminiscent of the resentment of Dostoevsky's splenetic underground clerk, will not, we might argue, be assuaged by taking a standardized test to prove one knows basic skills or by putting one's framed diploma on the classroom wall.

(The similarity between this particular notion of status discrepancy and means-ends analysis of Robert Merton and others should be noted. Merton speaks of the "dissociation between culturally prescribed aspirations and socially structured avenues for realizing these aspirations."[37] Along similar lines, Burton Clark discusses the "responses of organized groups to means-ends disparities, in particular focusing attention on ameliorative processes that lessen the strains of dissociation."[38] What we are suggesting here moves us in a somewhat different direction. Means-ends analysis implies cultural prescriptions for aspirations that are applied generally and accepted generally. In the case of teachers, the prescriptions for aspirations come from the teachers <u>themselves</u>, rather than from the larger society. The problem experienced by teachers is that others in the society do not accept the prescriptions.)

It is, in part, from this high level of status discrepancy that the arguments for emulation arise. Make teaching a "real" profession (like medicine), and all will be well, the argument runs. That is to say, status discrepancy will be reduced, with teachers getting that which they believe

they deserve. The argument stems from other motives as well. When teachers argue for emulation, are the arguments in some way specious? Do teachers desire the prestige associated with the "real" professions, or do they desire the money normally associated with those professions, or both? Or, on the other hand, are teachers sincere in arguing that elevated professional status will lead to better schools, better students, and a better society?

I would argue that the question of motives, while interesting, need not be addressed here. The point is that teachers--for whatever reasons--strongly believe that it is important to emulate the "real" professions, and they believe their professional status, through purposive efforts, can be elevated to that of the those professions.

The teacher professionalization literature suggests that when teachers advert to the "real" professions worthy of emulation, they advert almost exclusively to medicine and law.[39] One does not find in the teachers' rhetoric much mention of the desirability of emulating nursing, social work, or librarianship. (These are, after all, considered--by both teachers and by others--as "semi-professions," and why model your professional desires after groups having the same second-class status as your own?)

One also does not find many references to other occupational groups generally accorded higher professional status in our society (e.g., engineering, dentistry, architecture). The reluctance of teachers to advert to

these professions as models is probably due to a sense that these professions, while worthy (and of greater status than teaching), do not have quite the prestige and power of medicine and law.

As we might expect, there are no instances we know of in the teacher professionalization rhetoric in which other occupational groups, albeit exhibiting many of the "attributes" of professions, are cited as exemplary models. Other traditionally "non-professional" occupations are mentioned, but only as negative referent points ("Garbage collectors make more than we do"), not as exemplars.

The silence in the rhetoric regarding plain old occupations, crafts, and trades suggests once again that the gravitation toward selected professions is based less on a dispassionate analysis of attributes, efficacy, and value to society, and more on manifest power and prestige. Many occupational groups can claim with considerable justification (or at least as much justification as teachers) esoteric knowledge, socialization, extended formal training, testing, and state licensing.[40] But it is difficult to imagine beleaguered teachers bemoaning their status, dreaming of the day when they will have good training programs and high status and power "just like the beauticians." Training in cosmetology might well require literally thousands of hours in a clinical program before the initiate can enter the ranks of practitioners, but that requirement is of little significance for teachers looking for a lock on the occupational status and prestige market.

Of all the hundreds of occupations, only a few will serve as useful models in the eyes of the teachers, and of those, medicine is the premier model. It is premier because of its legitimated power, prestige, and status. But just as important, medicine is the premier model for teachers because of its mutability, its wondrous ascension in the 20th century.

Had medicine maintained the same status throughout history, it could not serve as a model because its status would seen as immutable, inherent in the nature of things. But, as has already been suggested (see footnote 17), medicine was once--and not very long ago at that--a weak, splintered occupation with little prestige and power. But just as one can speak of individual status mobility, so can one speak of the mobility of the occupations themselves. If physicians could change their status, could not teachers?

For these two reasons--current high status and historically low status --then, teachers expect medicine to provide the answers to their dilemma of status discrepancy. Accordingly, we must look carefully at the medical profession and its history to divine the reasons for the change in status from low to high.

In concluding our introductory discussion of teacher status, several points should be noted. First, the status of teaching in America has been relatively low. But just as the status of other professions is mutable, so has been the status of teaching. The conditions that obtained during the 18th, 19th, and early years of the 20th centuries have changed. The emerg-

ence of teacher unionization and teacher militancy in the 1960s resulted in relatively higher pay, better working conditions, and the removal of some social restrictions. Changes in some aspects of status, however, do not lessen the arguments we have made for status discrepancy and the desire for enhanced status; rather, the small changes that have been made can be seen as reinforcing the desire for additional change.

Second, the preoccupation with status change is not limited solely to individual teachers, nor do all individual teachers, we would hypothesize, exhibit the same levels of dissatisfaction with status discrepancy and the same levels of desire for increased status. It may well be that there are major differences between the views of individual teachers and the views expressed by leaders of teachers' unions, trainers of teachers, and those in related organizations. It remains to be seen whether teachers qua teachers view the pronouncements of others as acceptable analyses of the situation or as irrelevant to their needs.

Third, as suggested early on in this paper, much data regarding perceptions of teachers and others need to be obtained and analyzed in order to support or reject the basic arguments propounded here. Again, however, one purpose of this paper is to suggest the need for data, and to suggest the framework in which those data might be obtained and considered. The historical data and at least a portion of the current literature suggest, at any rate, perceived status discrepancy and a desire to reduce that discrepancy; the data also suggest a strong tendency on the part of teachers and their organizations to look to the medical profession as the exemplar.

Accordingly, it is to the history of the examplar that we must now turn. Following our examination of the transformation of medicine, we must determine what purposive efforts, if any, under what necessary conditions, if any, have a reasonable probability of leading to a similar change in the status of teaching. Too, we must determine whether such efforts, even if feasible, are otherwise desirable.

The Changing Status of Medicine

The status of the doctor in America remained relatively low during the 18th and 19 centuries. Doctors were portrayed as "auxiliaries to the King of terrors" in the late 1700s; the great majority of doctors were viewed as incompetents.[41] The relatively low status of medicine was reinforced by the anti-profession sentiments of the Jacksonian era: between 1826 and 1852, ten states rescinded laws governing the licensing of doctors.[42] Licensing of doctors was seen as favoritism toward a particular class, and there was a general sense that, in effect, one could be one's own doctor.

Throughout most of the 19th century, doctors continued to be subjected to attacks. Newspaper articles in the mid-1850s, for example, referred to "poisoning and surgical butchery," and declared that the profession was a "stupendous humbug." The profession's sense that all was not well is reflected in medical publication editorials: "On the Declining Relations of the Medical Profession to the Public" was one; another was "To What Cause Are We to Attribute the Diminished Respectability of the Medical Profession in the Estimation of the American Public."[43]

Concerns about low status led to the formation of the American Medical Association in 1847. At the organizational meeting of the AMA, those concerns were noted by its president: "The profession to which we belong . . . has become corrupt, and degenerate, to the forfeiture of its social position, and with it, of the homage it formerly received spontaneously and universally."[44] Commenting two years later, a special committee of the AMA declared that "It was not difficult to trace this abasement of the profession to its true cause. It had ceased to be a highly educated class."[45] (One must note, in passing, the recurring tendency to invoke notions of halcyon days: "the homage it formerly received"; "it had ceased to be a highly educated class." The teaching profession is not the only group to indulge in sentiments about how great things were in the good old days.)

By the second decade of the 20th century, however, the status of doctors had increased considerably and by the 1930s, doctors reached the pinnacle, with their status exceeded only by justices of the Supreme Court.[46] Their power had become considerable, their prestige legitimated. Doctors had become the epitome of social mobility, the Horatio Alger strive and succeed prescription writ large.

As one would expect, the social mobility of the medical profession has been the subject of considerable interest. Rather than attempt to treat the vast body of literature on the topic, selected references will be made in an attempt to discern the critical circumstances and factors leading to the abrupt and dramatic rise in the status of doctors.

Shryock provides a representative example of the literature in suggesting five factors that, accounted for the relatively low prestige of medicine:

1. Low standards for recruitment of entrants,
2. Poor medical schools,
3. general laxity of licensing laws,
4. lack of scientific basis for practice, and
5. competition between practitioners, and public condemnation of one practitioner by another.[47]

With the advent of medical education reform, the passage of strict licensing laws, the emergence of "scientific" medicine, and the restriction of competition, medicine was able, according to this argument, to gain considerable power and prestige.

Along similar lines, Kunitz argues that medicine came to power in large part because the demands of the Progressive Era for recognition and control of social problems:

> The result of recognizing problems in need of control resulted in the emergence of new occupations which asserted special competence in particular problem areas and ultimately claimed a license from society for autonomous professional status. However, not all occupations were equally successful in attaining this status. Medicine succeeded brilliantly; and I have suggested that this was the result of having a theory which was of great explanatory value in dealing with a series of explanatory problems, infectious diseases.[48]

Other factors have been identified, factors operating in concert and supporting the Progressive Era demands for control. Jarcho has noted that economic conditions were becoming more favorable:

> During the three decades from 1860 to 1890 a logarithmic growth had doubled the nation's population, its population density, and its per capita wealth. An important by-product was the creation of a small number of multimillionaires, some of whom developed into practical philanthropists. At about the same time the application of newer scientific methods of medicine began to yield the definite promise of effective prophylaxis for disease.[49]

For others, the well-known reforms in medical education are the critical factors, although there is disagreement as to the motives for reform. The appearance and broad acceptance of the Flexner Report,[50] has often been cited as the great sea change, with the subsequent demise (or continuing demise, as some have suggested) of the proprietary medical school, the rise in admissions standards, the emergence of medical school teaching and research as a career, and the acceptance of the certainty and universality of medical knowledge,[51] medicine was to consolidate its political base and legitimize its professional claims.[52]

Markowitz and Rosner suggest that the AMA united in advocating medical education reform, and also cite larger political factors involved in the reform:

> They did so because they believed that the economic and social situation of individual doctors and the profession as a whole at the turn of the century was bad. In part this arose from the general feeling of crisis that permeated the society during the depression of the 1890s. In addition, physicians and other professional groups saw their status and power being eroded and engulfed by the tremendous growth of industrial giants. The large corporation, having achieved its power through consolidation and control, increasingly dominated the land. Doctors likewise organized and sought to reform medical education in order to solve a number of professional problems. Many believe that medicine had to become more scientific. A goodly number of physicians were outraged at the inadequate facilities for instruction at many medical colleges. But, in addition, many doctors and medical spokesmen forthrightly argued that organization and reform were necessary to assure the physicians' own financial security and

> greater status and power in the community at large. These goals were not seen as contradictory. In fact medical spokesmen argued that only as the profession achieved high social standing, became more restrictive and provided its members with a good livelihood could it provide scientific, efficient medical care to the nation. Through reform the profession also solved a number of other internal problems: they commenced the consolidation of the components of a newly emerging university medical school complex; restricted intraprofessional competition; organized medicine's long-term opposition to group practice and government financed hospital and clinic care; and also institutionalized a two-class medical care system.[53]

Others have argued from a Marxist (or quasi-Marxist) point of view, suggesting that the rise of the medical profession was linked to the rise of industrial capitalism. By this line of reasoning, the alliance between the AMA and the capitalist class was reinforced to legitimate the class structure and to lessen class conflict.[54]

Still others have focused on dimensions of market control. Larson, for example, identifies seven market control factors that were favorable to the medical profession:

1. A salient, universal, and relatively invisible service;
2. Independence from the capital and goods market;
3. An unorganized, and fragmented clientele;
4. A standardized and clearly defined cognitive basis;
5. Standardization and institutionalization of the production of producers;
6. An independent relation to other markets, thus requiring the state protect against incompetents through licensing; and
7. Affinity with dominant ideological structures.[55]

A useful analysis and summary of the factors leading to the ascension of medicine is found in Paul Starr's The Social Transformation of American

Medicine. Starr suggests eight critical factors bearing on the transformation:

1. Growth in specialization and hospitals, leading to a shift from dependence on patients to dependence on colleagues;

2. Control of labor markets, cutting off the supply of cheap professional labor, and resulting in doctors mediating relationships between technical personnel and the labor market;

3. Socialization of capital investment, with doctors able to use hospitals and technical innovations at virtually no charge; health departments and schools performed diagnostic work and made referrals, thus increasing demand for doctors's services;

4. Absence of countervailing power, with no organized groups of buyers to counter the market power of doctors;

5. Lack of integrated organization, with split lines of authority between professionals and administrators, contributing to the preservation of the sovereign power of doctors;

6. Revolution in local transportation, which reduced the isolation of medical practice, improved efficacy of intervention, and brought greater dependence by patients on doctors;

7. Emergence of medical technology and scientific breakthroughs, which (a) increased manifest effectiveness of doctors, (b) increased the assymetry of the doctor-patient relationship, and (c) increased the collegial exercise of authority and collegial claims to objective judgment;

8. Market power, through which doctors were able to gain and solidify their position by meeting the felt needs of the larger society experiencing complex changes.[56]

No one factor, or even two or three factors, will adequately explain the rise of the medical profession. For example, the emergence of scientific medicine might appear to be critical. It is tempting to adopt the reasoning that advances in scientific medicine, reinforced by the

Flexner Report, led to major reform and thus to power. But, as Starr cautions,

> Science may improve the efficacy and productivity of a profession without making it rich or revered; knowledge must be transformed into authority, and authority into market power, before gains from the scientific advance can be privately appropriated by a profession.[57]

It is with this insight that we begin to move to solid ground. Acknowledged skills must be coupled with cultural authority--authority gained through external legitimacy. Legitimacy, in turn, involves "respect and deference, especially from the more powerful classes, [to] open the way to resources and legally sanctioned privileges."[58] The authority of medicine, then, rests in large part on the combination of knowledge complexity--scientific knowlege and technical innovations--and cultural demand, resulting, as Starr suggests, in legitimate complexity.

Starr's views are in accord with the penetrating analysis of Terence Johnson, who, in speaking of the professions in general, suggests:

> The assertion made that an occupation group rarely enjoys the resources of power which would enable it to impose its own definitions of the producer-consumer relationship suggests that professionalism as defined in the literature is a peculiar phenomenon. It is only where an occupational group shares, by virtue of its membership of a dominant class or caste, wider resources of power that such an imposition is likely to be successfully achieved, and then only where the actual consumers or clients provide a relatively large, heterogeneous, fragmented source of demand.[59]

In reviewing the many interrelated factors, the notion of legitimate complexity appears to provide the critical key to understanding the

successful rise of the medical profession. It was not simply a matter of doctors desiring power and monopoly and an asymmetric relationship between doctor and client. Many occupational groups have sought such monopolistic power and control, but without success. Doctors managed to gain privileges, power, higher incomes, and social status, not solely through their own internal efforts, but because their own efforts at consolidation and control were congruent--fortuitously, from the doctors' point of view--with external societal interests and values.

This necessarily brief excursion into the history of the rise of medicine in the early 20th century suggests that professions (or at least the medical profession) do not follow the pattern of development suggested by the "traits" proponents. The attribution of traits, either by members of a profession or by sociologists, is in effect after the fact, and has little explanatory power.[60]

As Johnson persuasively argues, professions are not occupations per se: professions are the means of controlling an occupation. Likewise:

> Professionalization is a historically specific process, which some occupations have undergone at a particular time, rather than a process which certain occupations may always be expected to undergo because of their "essential" qualities.[61]

It is thus that one can argue that doctors did not attain their preeminent position merely because they claimed to be altruistic, or because they claimed to possess a scientific body of knowledge, or because they claimed to "police their own," or because it became more difficult to get

into medical schools, or because medical school training became more extensive. Rather, doctors achieved their preeminence and gained mastery of the profession (or, more approriately, the occupation) because of a combination of economic and social factors. These factors can be summarized as follows:

1. The increase in the manifest efficacy of medicine, occasioned by scientific discoveries and technology;
2. The linking of scientific medicine and medical training;
3. The belief, beginning in the Progressive Era and supported by a wide variety of political groups, that medicine could no longer be a matter of self-administered first aid;
4. The increasing--and fragmented--demand for medical services; and
5. The willingness of powerful interest groups to support the medical profession through funding of hospitals, research centers, and medical schools.

These factors were, as we have noted, external to the profession, capitalized upon by doctors but not created by doctors. And, these factors were interrelated. Manifest efficacy of treatment stimulated demand and stimulated disbelief in personal powers to deal with one's medical problems. Fragmented demand and a lack of countervailing power stimulated the trend toward monopoly control, and resources (stimulated by both public health demands and scientific discoveries) were thus directed to one occupational group. It is these interrelated factors that led the medical profession to assume, in Starr's words, <u>legitimate complexity</u>--the real source of a profession's authority, power, and prestige.

With these several factors in mind, we now return to our central question: What purposive efforts, if any, under what conditions, will be

necessary for the teaching profession successfully to assume the status of doctors?

Doctor Status/Teacher Status

Given the preceding discussion of the transformation of the medical profession, it is clear that a similar transformation of the teaching profession would necessarily involve much more than self-proclamations of professionalism and the hanging of framed diplomas on the classroom wall. Major changes would have to occur both within the teaching profession and within the larger societal context.

We have identified the several factors leading to the transformation of the medical profession. Using these factors as our guiding criteria, the following six changes would be necessary.

1. New Technology

A new technology of schooling and learning would have to emerge, similar to the development of science and technology in medicine. The new technology would necessarily have the following characteristics:

a. The new technology would have to be demonstrably superior to current methods of schooling in the production of manifestly different outcomes, in much the same way diphtheria antitoxin was demonstrably superior to bloodletting. The results would have to

be obvious, and consistent, and obviously related to the technology. The technology would have to be universally applicable.

b. The new technology would have to produce results highly valued by society, and valued particularly by powerful groups controlling access to resources within the society. Without high valuing, there would be little demand. For example, a technology that could produce students all of whom could score at least 780 on either portion of the Scholastic Aptitude Test would have little impact if there were no societal demand for test-bright students. It should be stressed that such a demand could be argued for by the new educational technologists, but the demand could not come from them: demand is an external function.

c. The new technology would necessarily require professional judgment in its application. There would have to be some element of selection of facts and procedures from among several alternatives, and some element (albeit small) of risk. If the new technology merely involved, let us say, attaching students to a machine in order to turn them into brilliant test-takers, any-body could perform this routine task with a minimum of training. The new technology, in other words, would have to be characterized by complexity for claims to professional exclusiveness to be taken seriously.

d. There would have to be general external appearances of agreement among the new educational professionals as to the nature, scope,

and efficacy of the new technology. In much the same way as the medical profession emphasized the universality of scientific knowledge and presented a more or less united front to the public, disagreements about the new technology would have to be kept "within the church."[62]

2. Training Linked to the New Technology

Training in the new technology would, as with the technology itself, have to be manifestly efficacious. With very few exceptions, the only way one could learn how to make professional judgments in using the new technology would be by completing a prescribed course of study in a teacher training program. The course of study would necessarily be standardized, with little variation from institution to institution. Claims for universal efficacy of treatment would not be accepted as long as there was too much variation in training. In addition, the new teacher training programs would, without exception, have to be accredited. Legitimization of professional training could not take place as long as some programs were accredited and others were not.

3. Public Support for Restricted Practice

In line with the notion of a delimited and standardized course of study, the public would have to come to believe that only those persons so trained in the new technology should be allowed to practice as teachers.

Strict licensing laws, derived from this belief, would have to be enacted in each state; such licensing would have to replace current practices of certification.

4. Public Valuing of Schooling

Schooling would have to become an actual--as opposed to a merely rhetorical--priority of the society. The priority would have to be deeply felt, and felt across social classes. In particular, schooling would have to be seen as a priority among those groups controlling allocation of resources.

Reflecting this actual priority, considerable resources would have to be allocated from both the government and from the private sector for educational research and development. Such allocation would be necessary, both to increase knowledge production and to reinforce, through symbolism, the priorities of the society. (Medicine, of course, provides examples of both functions. We might also cite as an example the U.S. space exploration program, which, until perhaps recently, was accorded real as opposed to rhetorical priority.)

The specific output of the new technology have to be accepted and supported, as we have said. But beyond that, the general idea of schooling as having high value would have to be incorporated as part of the general culture and operating ideology.

5. Fragmented Demand for Services

Demand for schooling would have to be fragmented, with no competing interest groups capable of meeting the demand through alternative delivery of services. Necessarily, only those licensed to practice as teachers could be allocated resources and given the power to make critical decisions. Whatever the virtues of competition might be, those virtues do not include legitimization of professional claims.

6. Bifurcation of Authority

The lines of authority in the schooling bureaucracy would have to be bifurcated, with teachers given the authority to make decisions as to the application of the new technology, and school administrators effectively denied that authority. Along the same lines, teachers would have to be given the authority to determine the proper activities of the support staff, in much the same way doctors determine activities of nurses, interns, technicians, and other medical personnel.

We have outlined six interrelated requirements that, we argue, must be satisfied if teaching is to be accorded the same professional status that medicine has enjoyed for the last sixty years. Having done so, we can now turn to an assessment of the probabilities of meeting these requirements.

Meeting the Requirements: Can Teaching Do It?

In assessing the probabilities of teaching becoming as medicine, let us make three assumptions as to the best possible political and social context: (1) There is consensus among teachers regarding the advisability of mounting a serious full-scale professionalization effort; (2) There is a similar consensus among teacher-related groups; and (3) The effort is accorded high priority, with considerable resources somehow made available. Assuming a best case context, let us then consider our six requirements to determine the probable success of the effort.

1. New Technology

The probability of teachers (or anybody else, for that matter) developing a new technology is very low. There is nothing in the current research literature that suggests even a remote possibility of an emerging technology that will produce manifestly efficacious and universal outcomes, let alone outcomes that will have high valuing by society.[63] Predictions of this sort have the notorious reputation of being proven wrong-headed; virtually every major scientific breakthrough has been preceded by an "expert" telling us why nothing of the sort will happen for eons. Perhaps, by analogy, something similar will occur in the field of learning and behavioral psychology. Perhaps, but it seems highly unlikely.

The optimist might argue that such an assessment is far too gloomy and negative: there are, after all, more things in heaven and earth and

laboratories than are dreamt of in our philosophy. But optimism, while comforting, is too thin a reed to carry the burden of a major effort to professionalize the the teaching profession.

2. Training

It would be difficult to construct a new training program for teachers based on a nonexistent technology. One could, of course, construct new training programs with all sorts of expectations in mind, but it would be unreasonable to expect that a training program minus the required technology would have much bearing on the professionalization effort.

3. Public Support for Restricted Practice

If the criterion is public support for restrictions based on a new technology linked to new training programs, then the probability of meeting the criterion is close to zero. Based on the history of licensing in America, one might argue that strict licensing for teachers might come about: many occupations have received licensing protection. But, as we have seen, licensing per se does not give an occupation the sought-after prestige of the medical profession.

4. Public Valuing of Schooling

Here, the requirement focuses on both valuing of the necessary new technology and valuing schooling more generally. It has already been suggested that it is unlikely that a new technology will emerge; therefore, the probability of meeting the requirement is quite low. Is it not possible, however, that the society might reorder its values, giving schooling a much higher ranking in reality than it does now, despite the lack of a manifestly efficacious technology? Again, the optimist might like to entertain such a hope, but it is difficult to imagine large scale reordering of values without the motivating factor of an efficacious technology. For what other reasons would a society that for so long has placed a low actual value on schooling feel compelled to change?

5. Fragmented Demand for Services

The requirement here suggests that demand be fragmented, with no competition among various interest groups for meeting the demand. If, as we have assumed, there is no emergent new technology, then no interest group, including teachers, would be in a position to compete; as a result, the requirement could not be met.

6. Bifurcation of Authority

Simply demanding changes in power relationships would most likely not have much effect. Absent the technology, the related training, the demand, and public support, there would be little legitimize the demands. Again, one can--as has been the case--put forth demands for greater authority for all sorts of reasons. But it is unlikely that such demands would form even part of the basis for professionalization efforts. Rather, such demands would be viewed merely as self-serving or viewed as an internal struggle for power between teachers, administrators, and paraprofessionals.

Discussion

It is evident from the foregoing assessment that teaching cannot achieve the prestige and status of medicine by following the medical model. In our analysis, teaching fails to meet any of the six major criteria, and there is nothing in the context of either teaching or the larger society to suggest even a slight probability that the criteria will be met at some future time.

What is necessary to successfully follow the path of medicine cannot be achieved; a fortiori, the current attempts to follow that path will continue to be ineffectual. One of those attempts, as we have noted, involves the passage of some sort of examination as a prerequisite for certification. Quite clearly, the examinations currently required by some states will not contribute to professionalization a la medicine, and may in

fact have a negative result. To claim that testing for attainment of basic skills is somehow the equivalent of medicine's National Boards is merely to underscore the real differences.

Perhaps new, more comprehensive, and difficult examinations can be constructed. But even assuming that the political obstacles are overcome (obstacles that have existed, apparently, since William Russell's day), it is difficult to imagine any examination having much significance as long as a new technology is lacking. It is indeed possible to construct a rigorous test, but if the test has no clear bearing on the necessary legitimate complexity of professional work, the test will be viewed as yet one more example of obscurantist hair-splitting by the educationists. Alternatively, lacking legitimate complexity as its basis, a rigorous test will be viewed no differently from tests required for licensing in many occupations, and thus will have little impact on professionalization efforts. (Tests for licensing of beauticians might well be rigorous, but that fact has little bearing on the status of beauticians.)

Symbolic attempts at professionalization a la medicine--the hanging of one's diplomas on the wall, for example--clearly will have no positive impact. There is little magic in the world, and superficial imitations of outward manifestations of power are at best a placebo. Such symbolic attempts might well have a negative impact in that they would most likely be seen as assuming a virtue if you have it not.

Other symbolic attempts, such as becoming a member of symphony or museum boards of directors because that is what doctors do[64] may be person-

ally stimulating (and difficult to manage, what with myriad assignments to correct and lessons to plan), but will do little to effect the desired professionalization. Sitting next to a doctor at a board meeting will not make one a doctor or give one a doctor's status.

A fundamental difficulty with all of these several attempts superficially to emulate the historical conditions and circumstances of medicine rests with the nature of the rhetoric used. To say, in effect, "we should have the status and prestige of doctors because we are doing what doctors did to get where they are" is to engage in argument from simulitude. The focus of the argument cannot help but shift from considerations of inherent merit to considerations of congruence. "I'm like a doctor," the teacher says. "Prove it," replies the audience; but as we have seen, proof cannot be forthcoming because the major criteria cannot be met. By the very structure of the teachers's rhetoric, the efforts to achieve professionalization a la medicine are self-defeating.[65]

Such efforts are demoralizing, not only because they are self-defeating, but also because they are inauthentic. As Etzioni notes, inauthenticity results when there is a superficial appearance of responsiveness while the underlying conditions remain alienating.[66] By engaging in arguments from simulitude--or by accepting their leaders's arguments--teachers, we would suggest, cannot help but experience a sense of frustration and helplessness, and consequent anger directed at themselves, their leaders, or the society. The arguments shift the focus to the nonessential, with consequent waste of political capital, while tne underlying alienating conditions remain ignored.

All told, it would seem, the fundamental problem of teacher status discrepancy, viewed in terms of the historical conditions of the medical model, is a double bind. The major efforts needed to meet the six major criteria are impossible to make. The minor efforts that are possible to make are inconsequential and debilitating.

Must we accept the doleful conclusion that there is nothing to be done? Is there no way out of the double bind? We believe there is a strategy, albeit difficult and demanding, that has a possibility of success, and it is to a discussion of that strategy that we now turn.

Teacher Professionalization: Beyond the Double Bind

Gregory Bateson tells of the Zen master who holds a stick over the pupil's head, saying "If you say this stick is real, I will strike you with it. If you say the stick is not real, I will strike you with it. If you don't say anything, I will strike you with it." One way out of this double bind is to take the stick away from the master.[67]

As we have demonstrated, teachers are in their own double bind, the double bind of preoccupation with emulating the medical model of professionalization: that which is necessary is impossible; that which is possible is irrelevant and self-defeating. Teachers must do as the Zen student; they can move beyond their double bind situation by taking away the stick.

It is possible for teachers to move beyond the double bind because the preoccupation with medicine is self-imposed and can be stopped. The dreams of becoming as doctors are no more than dreams, and the pursuit of those dreams is, as Laing suggested in another context, rather like "hunting a hare whose tracks are in the mind of the hunters."[68]

Once teachers (and their leaders) cease attempts to define themselves as "professionals" in terms of the ideal of the medical model, they will begin to free themselves from the tyranny of their own dreams. It will not be easy to move beyond the double bind, to say, with John Lennon, "the dream is over." The preoccupation with medicine has a long history; the ideology pervasive. Letting go of the dream will be difficult without some underlying rationale.

Perhaps what will make the necessary effort seem worthwhile despite the difficulties is an awareness of new possibilities. Once freed from the self-imposed tyranny of their dreams, teachers will be able to begin the restructuring of their professionalization rhetoric and will be able to begin the redefinition of their situation in ways more likely to be viewed as legitimate by the larger society.

In our discussion of teachers' professionalization rhetoric, we suggested that the use of arguments from similitude was unproductive. By letting go of the medical model, teachers will be able to shift their rhetoric from similitude arguments to bedrock arguments from definition. Rather than encouraging self-defeating comparisons with doctors, teachers

will be able to argue from their own definition of themselves and their work context.

The bedrock argument, in our opinion, might reasonably have a moral basis. As Becker suggests, public willingness to accord honors to an occupation derives from a collective sense of the moral praiseworthiness of that occupation.[69] Teachers can legitimately argue for such worthiness because of the moral imperative that obtains from their unique role as mediators of the relationship between parent, child, and the state. What provides the role its uniqueness--and its moral imperative--is the historic fact of compulsory schooling. Since that compulsion has been a central aspect of schooling in America for such a long time, its implications tend to be overlooked. If, as we suggest, compulsion has a major bearing on teachers' restructured rhetoric, then we should explore those implications in greater detail.

Parents are required by law to send their children to school. Those parents with necessary resources can send them to private schools; those with resources and time can opt for home schooling. But, for the great majority of parents, public schools represent the only means to comply with the law.[70] In general, then, there is equality of surrender.

Equality of surrender should, we would argue, imply equality of treatment. That is to say, children should not be subjected to differential responses because of differences in social class, ethnicity, gender, or other factors over which children have no control. It has long been

recognized that there is in fact inequality of treatment (and inequality of outcomes, for that matter). But the existence of inequality does not justify inequality. Equality of surrender must imply equality of treatment. Therefore, those responsible for the treatment of children in schools have a moral obligation to ensure equality of treatment.

Children, by nature, are defenseless. Children, by tradition, are taught to distrust strangers. But parents, in complying with compulsory schooling laws, turn their defenseless children over to virtual strangers. (Consider the amount of information most parents seek in selecting a baby-sitter versus the amount of information those same parents have about public school educators.) The surrendering of children to the state's schools thus represents a considerable act of trust. The state claims surrender is for the general good; the parent accepts the claim, but claims in return a guarantee that the child will be kept free from physical and mental harm. Therefore, those responsible for the physical and mental health of children in schools have a moral obligation to ensure that children are kept from harm.

Compulsory schooling, then, carries with it immense moral obligations and, therefore, provides the legitimate basis for restructuring teacher professionalization rhetoric. (It is curious that such should be the case. After all, by traditional reckoning, teaching has been considered a lesser profession by virtue of the nature of the clientele served by teachers. The compulsary nature of schooling (as opposed to the voluntary setting in medicine) and the low social status of children have been cited as func-

tional reasons for the low status of teaching. But, as we have demonstrated, it is precisely because children are compelled and children are defenseless and have low status that teaching has moral obligations and thus must have moral praiseworthiness. That which has been posited as the obstacle turns out to be the enabler, and therein lies the irony.)

The rhetorical base can thus be shifted, with positive results. Within this new framework, teachers can begin the redefinition of their work context (and, consequently, their training programs). That the conditions and circumstances of teaching are in need of redefinition has been amply documented.[71] The new rhetorical base will, we would suggest, give much greater credibility to efforts to redefine the work context because the arguments for change can be based legitimately on moral grounds, rather than (as is often perceived) on motives of pecuniary gain.

The strategy we have outlined is, as we have suggested, difficult and demanding. It involves much more than one-time pronouncements from teachers' leaders; much more than a press conference or an editorial or two in a house organ. We are dealing here with fundamental shifts in the rhetoric of teachers, with the letting go of a long-held dream, and such shifts will require much time to move beyond the superficial to the essential.

Beyond the fundamentally important shift in rhetoric, the strategy must necessarily entail changes in related areas. If the primary defining factor of teaching is the compulsion of the defenseless, then there will

need to be careful examination of such matters as (1) the process by which people are selected into training programs, (2) the nature and ends of preservice training, (3) the selection and evaluation of teachers, and (4) the continuing education of teachers. All of these elements must be articulated in ways that will reinforce the underlying rhetoric, and the reinforcement must be made manifest to the public.

There is no guarantee that the strategy will be successful. Necessarily, any professionalization strategy involves a public response, and we cannot predict with certainty that the response to our suggested strategy will be positive. We can predict, however, that the current strategies to professionalize the profession will continue to be ineffectual because they are based on the wrong rhetoric and are inevitably doomed to failure. We can also argue that a restructured rhetoric, coupled with a redefinition of the work context and training programs, provides the basis for a much greater chance of success. It seems more reasonable to attempt a strategy that might work than to follow one that surely cannot work.

If the new professionalization movement does not succeed, if the public does not accept the claims to moral praiseworthiness, where does that leave us? It leaves us, to be sure, with continued low status, continued inadequate working conditions, continued inadequate training programs, and continued low pay. But it also leaves us with the incontrovertible facts of compulsory schooling and the moral imperatives derived therefrom. Our suggested strategy for professionalization cannot alter these facts. But our strategy will, at the very least, give a better sense of what we are

about to those who volunteer to accept the sacred trust of mediating the on-going relationship between parents, children, and the state.

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NOTES

1. John Dewey, "The Relation of Theory to Practice in Education," Third Yearbook of the National Society for the Scientific Study of Education (Chicago: University of Chicago Press, 1904), p. 10.

2. Francis Chase, "The Improvement of Teacher Certification: Next Steps, in Annual Report of the National Education Association National Commission on Teacher Education and Professional Standards (Washington, D.C.: NEA, 1953), p. 88. A similar instance was provided by Ralph McDonald at the same meeting of minds:

> "In this country at the present time we are in the throes of the movement to convert elementary school teaching into a profession. The movement has progressed to the point that I now feel safe in saying that it will definitely succeed. In fact, I will go so far as to predict that by 1975, despite all obstacles, elementary school teaching will be a full-fledged profession in the United States" (Ibid., pp. 33-34).

3. See "New Panel's Goal: To Make Teaching 'True Profession,'" Education Week 4 (29 May 1985): 1, 12.

4. Education Week 5 (4 September 1985) contains three articles dealing with NEA and AFT plans: for interviews with Mary Hatwood Futrell and Albert Shanker, see pp. 6-7; see also "Unions: A Compaign to 'Professionalize' Teachers", pp. 1, 32; and "Hiring of Untrained in Shortage 'Crisis' Makes Sham of Reform, Futrell Warns," pp. 1, 34.

5. Education Week 5 (4 September 1985), p. 32.

6. Ibid., p. 34.

7. National Teachers' Association, Proceedings, 1957 (Syracuse, N.Y.: Bardeen, 1909), p. 311.

8. Ibid., p. 16, 21. An early advocate of the need for a "certificate of competency to teach, warranted by a teachers' association," (p. 23), Russell argued for an examination:

> "at the hands of the actual members of the profession, as is virtually the case at the present day when a lawyer is admitted to the bar, a physician to the membership of a State or national medical association, or a licentiate is ordained for the ministry." (pp. 21-22)

Although Russell extolled the virtues of licensure controlled by the teachers' association, he recognized the difficulties of reaching agreement on the matter:

> "Whatever disposal of made of the subject of professional rank and recognition for teachers, the great considerations of personal duty in regard to associated and united effort for the advancement of education, are the subjects that lie immediately before us." (p. 24)

It was not to be the only time that teachers' associations recognized, but declined to face squarely, the complications of licensure, examinations, and competency, while electing, rather to deal with the perceived exigencies of organizational politics.

9. Representative examples of the three approaches to professionalization will be found in the Bibliography.

10. A delightful early example of the vagueness of the term, "professional," is found in the first of Horatio Alger's upward and onward novels, Ragged Dick (New York: Collier, 1962). Our hero, Dick, is renting a room from one Mrs. Mooney:

> "What is your business, sir, if I may inquire?" said Mrs. Mooney. "Oh, I'm professional!" said Dick. "Indeed!" said the landlady, who did not feel much enlightened by this answer. [After chatting a bit more, the landlady seeks further enlightenment:] "Did you say you was purfessional?" "Yes, ma'am," said Dick, politely. "You ain't a-- a--" Mrs. Mooney paused, uncertain what conjecture to hazard. "Oh, no, nothing of the sort," said Dick, promptly. "How could you think so, Mrs. Mooney?" "No offense, sir," said the landlady, more perplexed than ever. "Certainly not," said our hero. (pp. 116-17)

Although "professional" and related terms are commonly used, there is curiously little in the literature to suggest much empirical grounding for apprehending their meanings in general use. A typical example is the recent Holmes Group document ("Tomorrow's Teachers: A Report of the Holmes Group," The Chronicle of Higher Education, April 9, 1986, pp. 27-37), in which the terms "professional" and "profession" are invoked repeatedly, but never defined. To the extent a profession involves public sentiment and public support, we would do well to examine more closely these meanings as held generally.

11. For typical examples, see Willard S. Elsbree, The American Teacher (New York: American Book Co., 1939), and Myron Lieberman, Education as a Profession (Englewood Cliffs, N.J.: Prentice-Hall, 1956).

12. Richard Hofstadter, Anti-Intellectualism in American Life (New York: Knopf, 1964), pp. 315-16.

13. Robert Wiebe, The Search For Order, 1877-1920 (New York: Hill and Wang, 1967), pp. 117-18.

14. As quoted by Howard K. Beale, A History of Freedom of Teaching in American Schools (New York: Scribners, 1941), p. 11. The use of indentured servants as teachers was also noted in 1727 by a Baltimore cleric: "There are some private schools within my reputed district which are put very often into the hands of those who are brought into the country & sold for Servants. . . . When a Ship arrives in the River, it is a common expression with those who stand in need of an instructor for their children, -- Let us go & buy a School Master." [As quoted in William Stevens Perry, ed., Historical Collections Relating to the American Colonial Church V, (Davenport, Iowa: 1878), p. 47.]

15. R. Carlyle Buley, The Old Northwest Pioneer Period, 1815-1840, vol. 1 (Indianapolis: Indiana Historical Society, 1950), p. 372.

16. Jackson T. Main, The Social Structure of Revolutionary America (Princeton, N.J.: Princeton University Press, 1965), p. 219.

17. Main, The Social Structure of Revolutionary America, discusses the status of doctors (pp. 144; 201-02) and lawyers (pp. 205-06). An excellent discussion of the status of doctors is also to be found in Paul Starr, The Social Transformation of American Medicine (New York: Basic Books, 1982), Introduction, and Chapters 1-3; see also Kenneth M. Ludmerer, Learning To Heal (New York: Basic Books, 1985), chapter 1.

18. Willard Waller, Sociology of Teaching (New York: John Wiley, 1965), p. 58. (Reprinted; originally published 1932.)

19. Ibid., p. 61.

20. Robert S. Lynd and Helen Merrell Lynd, Middletown (New York: Harcourt, Brace & World, 1929), p. 209.

21. For a typical discussion, see Amitai Etzioni, The Semi-Professions and their Organization (New York: Free Press, 1969).

22. Nathan Glazer, "The Schools of the Minor Professions," Minerva 12 (July 1974): 346-64. Glazer also claims that medicine and law "are what in mind when one defines the professions or when one estimates the degree of 'professionalism' of various occupations" (p. 347).

23. C. Wright Mills, White Collar (New York: Oxford University Press, 1951), p. 129.

24. See, among many examples, James Koerner, The Mis-Education of American Teachers (Boston: Houghton-Mifflin, 1963); W. Timothy Weaver, America's Teacher Quality Problem: Alternatives for Reform (New York: Praeger, 1983); see also Phillip C. Schlechty and Victor S. Vance, "Recruitment, Selection and Retention: The Shape of the Teaching Force" Elementary School Journal 83 (1983): 469-87; and Victor S. Vance and Phillip C. Schlechty, "The Distribution of Academic Ability in the Teaching Force: Policy Implications" Phi Delta Kappan 64 (September 1982): 22-27.

25. Donna H. Kerr, "Teaching Competence and Teacher Education in the United States," Teachers College Record 84 (Spring 1983): 531. For earlier examples of similar sentiments, see Arthur Bestor, Educational Wastelands: The Retreat From Learning in Our Public Schools (Urbana, Ill.: University of Illinois Press, 1953; Mortimer Smith, And Madly Teach: A Layman Looks at Public School Education (Chicago: Regnery, 1949); and Mortimer Smith, The Diminished Mind: A Study of Planned Mediocrity in our Public Schools (Chicago: Regnery, 1954).

26. Herbert J. Muller, Freedom in the Modern World (New York: Harper & Row, 1966), p. 306.

27. John I. Goodlad, A Place Called School (New York: McGrawHill, 1984), p. 315; p. 318. See also "Tomorrow's Teachers: A Report of the Holmes Group," The Chronicle of Higher Education, April 9, 1986, pp. 27-37.

28. Theodore R. Sizer and Arthur G. Powell, "Changing Conceptions of the Professor of Education." In To Be A Phoenix: The Education Professoriate, edited by James Steve Counelis (Bloomington, Ind.: Phi Delta Kappa, 1969), p. 73.

29. Edgar B. Wesley, NEA: The First Hundred Years (New York: Harper, 1957), p. 136.

30. Thomas R. Miller, Annual Report of the NEA/National Commission on Teacher Education and Professional Standards (Washington, D.C.: NEA, 1953), p. 74.

31. Christopher Jencks and David Riesman, The Academic Revolution (New York: Doubleday, 1968), p. 203.

32. M. V. O'Shea, "Relative Advantages and Limitations of Universities and Normal Schools in Preparing Secondry Teachers," Fourth Yearbook of the National Society for the Scientific Study of Education (Chicago: University of Chicago Press, 1906), p. 94.

33. Jencks and Riesman, Academic Revolution, p. 234.

34. Abraham Flexner, Universities: American, German, English (New York: Oxford University Press, 1930), p. 29.

35. Robert M. Hutchins, The Higher Learning In America (New Haven: Yale University Press, 1936), pp. 114-15.

36. See, for example, George W. Hartmann, "The Prestige of Occupations: A Comparison of Educational Occupations and Others," Personnel Journal 13 (October 1934): 144-152.

37. Robert K. Merton, "Social Structure and Anomie," in Social Theory and Social Structure, rev. ed. (New York: Free Press, 1957), p. 134.

38. Burton R. Clark, "The 'Cooling-Out' Function in Higher Education," American Journal of Sociology, May 1960, p. 569.

39. Of the many paeans to the wonders and joys of medicine and law, Robert Schaefer's comparison of the working conditions of teachers and those in the more exalted professions is of particular interest:

> "Other professions which involve person-to-person relations provide some respite -- refreshing moments when the concentration required in projecting an idea, an ideal, or a product can be eased. The doctor, for example, spends only a part of each day conferring with patients. He has almost never to deal with his clients in a group, and most of those he sees are too weak and too low-spirited to resist him. Only a few attorneys serve as trial lawyers, and those few, unlike teachers, are required to face their judges and juries a mere fraction of the working day" [In Schaefer, The School As a Center of Inquiry (New York: Harper & Row, 1967), p. 36.]

40. Issues of occupational licensing tend to be overlooked in the professionalization literature, with licensing taken as a matter of course. But licensing is a reflection of political struggles and power relationships; it is not automatically provided an occupation by the state.

> For useful discussions of occupational licensing, see J. A. Cathcart and G. Graff, "Occupational Licensing: Factoring It Out" Pacific Law Journal (1978): 147-63; S. L. Carroll and R. J. Gaston, "Occupational Licensing and the Quality of Service: An Overview," Law and Human Behavior 7 (1983): 139-46; Harris S. Cohen, "Professional Licensure, Organizational Behavior, and the Public Interest," The Milbank Memorial Fund Quarterly 51 (Winter 1973): 73-88; Walter Gellhorn, Individual Freedom and Governmental Restraint (Baton Rouge: Louisiana State University Press, 1956); Gellhorn, "Occupational Licensing: Nationwide Dilemma," Journal of Accountancy 101 (January 1960): 39-45; Gellhorn, "The Abuse of Occupational Licensing," The University of Chicago Law Review 44 (1976): 6-27; W. Brookes Graves, "Professional and Occupational Restrictions," Temple Law Quarterly XIII, 1939: 334-63; Thomas G. Moore, "The Purpose of Licensing," The Journal of Law and Economics 4 (1961): 93-117; and Daniel B. Hogan, "The

Effectiveness of Licensing: History, Evidence, and Recommendations," Law and Human Behavior 7 (1983): 117-138. A good collection of articles on the subject is found in Occupational Licensure and Regulation, edited by Simon Rottenberg (Washington, D.C.: American Enterprise Institute for Public Policy Research, 1980); of particular interest is Rottenberg's "Introduction" (pp. 1-10) and "Professionals and the Production Function: Can Competition Policy Improve Efficiency in the Licensed Professions?" (pp. 225-64). An excellent historical summary is provided by Lawrence M. Friedman, "Freedom of Contract and Occupational Licensing, 1890-1910: A Sociological Study," California Law Review 3 (May 1965): 487-534.

41. Main, The Social Structure of Revolutionary America, pp. 201-202.

42. In this connection, see Samuel Haber, "The Professions and Higher Education: A Historical View," in Higher Education and the Labor Market, edited by Margaret S. Gordon (New York: McGraw-Hill, 1974), pp. 237-80.

43. As quoted in Richard H. Shryock, Medicine in America: Historical Essays (Baltimore: The Johns Hopkins University Press, 1666), pp. 150-51.

44. As quoted in Ludmerer, Learning To Heal, p. 27.

45. Ibid., p. 27.

46. See, for example, George S. Counts, "The Social Status of Occupations: A Problem in Vocational Guidance," The School Review 33 (January 1925): 16-27; George W. Hartmann, "The Prestige of Occupations: A Comparison of Educational Occupations and Others," Personnel Journal 13 (October 1934): 144-152; Alex Inkeles and Peter H. Rossi, "National Comparisons of Occupational Prestige," American Journal of Sociology 61 (January 1956): 329-39; and Robert W. Hodge, Paul M. Siegel, and Peter H. Rossi, "Occupational Prestige in the United States, 1925-63," American Journal of Sociology 70 (1964): 289-302.

47. Shryock, Medicine in America, Chapter VIII.

48. Stephen J. Kunitz, "Professionalism and Social Control in the Progressive Era: The Case of the Flexner Report," Social Problems, 1975, p. 25.

49. Saul Jarcho, "Medical Education in the United States -- 1910-1956," Journal of the Mount Sinai Hospital 26 (1959): 342-343.

50. Abraham Flexner, Medical Education in the United States and Canada (New York: Carnegie Foundation For the Advancement of Teaching, Bulletin No. 4, 1910).

51. See, for example, Michael Schudson, "The Flexner Report and the Reed Report: Notes on the History of Professional Education in the United States," Social Science Quarterly 55 (1974): 374-61.

52. The literature pertaining to Flexner and the reform of medical education is extensive. In addition to sources already cited, see David H. Banta, "Medical Education, Abraham Flexner: A Reappraisal," Social Science and Medicine 5 (1971), 655-661; Lewellys F. Barker, "Medicine and the Universities," American Medicine 4 (1902): 143-147; Carleton B. Chapman, "The Flexner Report by Abraham Flexner," Daedalus (Winter 1974): 105-117; Daniel Fox, "Abraham Flexner's Unpublished Report: Foundations and Medical Education, 1909-1928," Bulletin of the History of Medicine 54 (Winter 1980): 475-96; Robert P. Hudson, "Abraham Flexner in Perspective: American Medical Education, 1865-1910," Bulletin of the History of Medicine 46 (September-October 1972): 545-61; Steven Jonas, Medical Mystery: The Training of Doctors in the United States (New York: Norton, 1978); Martin Kaufman, American Medical Education: The Formative Years, 1765-1910 (Westport, Conn.: Greenwood Press, 1976); Reuben A. Kessel, "The A.M.A. and the Supply of Physicians," Law and Contemporary Problems 35 (Spring 1970) (Symposium on Health Care, part 1): 267-83; Lester S. King, "Clinical Science Gets Enthroned: Part II," Journal of the American Medical Association 250 (1983): 1847-50; Lester S. King, "The Flexner Report of 1910," Journal of the American Medical Association 251 (1984): 1079-86; Ellen Condiffe Lagemann, Private Power for the Public Good: A History of the Carnegie Foundation for the Advancement of Teaching (Middletown, Conn.: Wesleyan University Press, 1983); Charles E. Odegaard, "A Description of the Role of the University in Modern Society Together With Encouragement to the Medical School to Turn its Flirtation with the University into a Full Blown Romance," California Medicine 106 (May 1967): 337-45; George Stevens, The Structure of American Medical Practice, 1875-1941 (Philadelphia: University of Pennsylvania Press, 1983); Rosemary Stevens, American Medicine and the Public Interest (New Haven, Conn.: Yale University Press, 1971); Mary Roth Walsh, Doctors Wanted: No Women Need Apply (New Haven, Conn.: Yale University Press, 1977; J. Richard Woodworth, "Some Influences on the Reform of Schools of Law and Medicine, 1890-1930," Sociological Quarterly 14 (Autumn 1973): 496-516.

53. Gerald E. Markowitz and David Karl Rosner, "Doctors in Crisis: A Study of the Use of Medical Education Reform to Establish Modern Professional Elitism in Medicine," American Quarterly 25 (March 1973): 83-107.

54. See, for example, Howard S. Berliner, "A Larger Perspective on the Flexner Report," International Journal of Health Services 5 (September 1975): 573-92; Berliner, "New Light on the Flexner Report: Notes on the AMA-Carnegie Foundation Background, Bulletin of the History of Medicine 51 (1977): 603-09; and E. Richard Brown, Rockefeller Medicine Men: Medical Care and Capitalism in America (Berkeley: University of California Press, 1979).

55. Magali Sarfatti Larson, The Rise of Professionalism: A Sociological Analysis (Berkeley: University of California Press, 1977), Chapters 3-4. See also Donna H. Kerr, Barriers To Integrity: Modern Modes of Knowledge Utilization (Boulder, Colo.: Westview Press, 1984), Chapter 3.

56. Starr, Transformation of American Medicine. See especially pp. 58-59; 71-80; 137-42; 230-31.

57. Ibid., p. 144.

58. Ibid., p. 80.

59. Johnson, Professions and Power, pp. 42-43.

60. In this connection, see Laurence Veysey, "Plural Organized Worlds of the Humanities," in The Organization of Knowledge in Modern America, 1860-1920, edited by Alexandra Oleson and John Voss (Baltimore: Johns Hopkins University Press, 1979), 51-106.

61. Johnson, Professions and Power, p. 45.

62. The probability of developing a new technology is low. Even if a new technology did emerge, there would remain the critical matter of teacher acceptance. If past behavior is any indicator, the odds for acceptance are not good: teachers have tended to view almost every technological development to date as a threat to their "professionalism."

63. There have been, of course, interesting and possibly useful advances in educational psychology over the past several decades; these advances some have argued, provide a reasonable basis for claiming that teaching has become a science. See, for example, N. L. Gage, "What Do We Know About Teaching Effectiveness," Phi Delta Kappan 66 (October 1984): 87-93. But these advances, while perhaps edifying to the cognoscente, have not, and most likely will not, produce manifestly efficacious and universal outcomes.

64. As was suggested in an address by Chester Finn, Assistant to the Secretary of Education, at the annual meeting of the American Association of Colleges for Teacher Education, Chicago, March 1986.

65. For a penetrating discussion of the nature and implications of rhetoric, see Richard Weaver, The Ethics of Rhetoric (Chicago: Regnery, 1953). Particularly germane are Chapters III, "Edmund Burke and the Argument From Circumstance," and IV, "Abraham Lincoln and the Argument From Definition."

66. Amitai Etzioni, The Active Society (New York: Free Press, 1968), Chapter 21.

67. Gregory Bateson, Steps to an Ecology of Mind (New York: Ballantine, 1972), p. 65. See also, in this volume, the essays on double bind theory in Part III.

68. Ronald Laing, The Politics of the Family (New York: Vintage, 1972), p. 44.

69. Howard S. Becker, "The Nature of a Profession," in Education for the Professions, edited by Nelson Henry, p. 26-46 (Chicago: 61st Yearbook of the National Society for the Study of Education, Part II, 1962).

70. Roger Soder and Richard L. Andrews, "The Moral Imperatives of Compulsory Schooling," Curriculum in Context (Summer 1985), pp. 6-9, 12.

71. See, for example, John Goodlad, A Place Called School.

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